## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10822758

		CLAIMS A	S FILED (Colum		(Column 2)			SMALL ENTITY TYPE		OB	OTHER THAN	
TOTAL CLAIMS			93				1		FEE	٦	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		1	BASIC FE	+	OB	24012 551	
TOTAL CHARGEABLE CLAIMS			99 minus 20=		. 3			XS 9=	†	7	YEAR	cla
INDEPENDENT CLAIMS			3	ninus 3 =		0			-	OR		74
⊢		NDENT CLAIM P						X43=	<del> </del>	OR	X86=	
							+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	arp
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1)			<del></del>	(Colum		(Column 3) SMALL			ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23	Minus	- 2	3	=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	L	3	=		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MI	JLTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
					•	- -	L	TOTAL			TOTAL	
		(0-1: 4)	•	40 - 4	<b>~</b> `\		A	DDIT. FEE		OR,	ADDIT. FEE	
	•	(Column 1)		(Colum		(Column 3)					· · · · · · · · · · · · · · · · · · ·	
۶ŀ		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	EA J\$LY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	<u> </u>	Minus	***		= .		X43=	•	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
		•		•			L	+145=		OR	+290=	
		•			•		ΑŪ	TOTAL DOTT, FEE		OR A	TOTAL DDIT. FEE	
		(Column 1)		(Columr		(Column 3)						·
ENIC	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	4.4		<b>e</b> .		X\$ 9=		OR	X\$18=	
5 L	Independent		Minus	***		=		X43=		ı	X86=	
<b>`</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						$\vdash$	A70-	<b></b>	OR	<b>^00≡</b>	
			•				1	145=	Į.	OR	+290=	
•• II	this entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR AL	TOTAL ODIT. FEE	
Tt	ne "Highest Numi	ber Previously Paid	For* (Total or	Independent	s inan ) is the h	o, enter '3.' ighest number (	found	in the appr	opriate box		_	